



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): DAVID LAWRENCE) Group Art Unit: 3629
Application No.: 09/825,470) Examiner: Mooneyham, Janice A.
Filing Date: April 2, 2001) Docket No.: 3499-107
(New BMT Docket No.: G08.127)
Title: AUTOMATED LEGAL RISK)
MANAGEMENT)

CERTIFICATE OF MAILING UNDER 37 CFR 1.8

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Dated: May 25, 2005

By:

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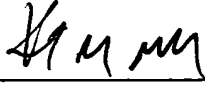
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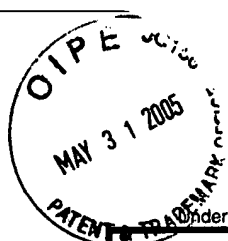
Please direct all future correspondence with respect to the above-identified application to:

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Respectfully Submitted,

May 25, 2005
Date


Kurt M. Maschoff
Reg. No. 38,235



3629
JFW

PTO/SB/21 (09-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/825,470
		Filing Date	April 2, 2001
		First Named Inventor	Lawrence, David
		Art Unit	3629
		Examiner Name	Mooneyham, Janice A.
Total Number of Pages in This Submission	2	Attorney Docket Number	3499-107 (New BMT Docket No.: G08.127)

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input checked="" type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance communication to (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Acknowledgement Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Buckley, Maschoff & Talwalkar LLC		
Signature			
Printed name	Kurt M. Maschoff		
Date	May 25, 2005	Reg. No.	38,235

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